PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10812773

CLAIMS AS AMENDED - PART II	RATE RASIC FEE R	FEE. 770.00
FOR NUMBER FILED NUMBER EXTRA BASIC FEE 385:00 OF TOTAL CHARGEABLE CLAIMS Sminus 20 =	BASIC FEE 7 X818= 7 X86= 7 TOTAL 7	
TOTAL CHARGEABLE CLAIMS / minus-20 - CLAIMS / minus-20 - CLAIMS AS AMENDED - PART II	X\$18= - 	770.00 344
INDEPENDENT CLAIMS YMMENS 3 = 1 X43 OF MULTIPLE DEPENDENT CLAIM PRESENT +145 OF OF CLAIMS AS AMENDED - PART II	X86= 2 +290=	344
MULTIPLE DEPENDENT CLAIM PRESENT +145= OF TOTAL OF CLAIMS AS AMENDED - PART II	+290= TOTAL //	344
MULTIPLE DEPENDENT CLAIM PRESENT +145= OF * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL CLAIMS AS AMENDED - PART II	+290= 	1114
* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OF	TOTAL	1114
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(Column 1) (Column 2) (Column 3) SMALL ENTITY OR	SMALLEN	YTITY
CLAIMS REMAINING REMAINING AFTER AMENDMENT RATE PREVIOUSLY = PRESENT PREVIOUSLY = PAID FOR Total Independent Minus Total Tot	4 1	ADDI- TIONAL FEE
\(\bar{\bar{\bar{\bar{\bar{\bar{\bar{\bar	X\$18=	
Independent # Minus = X43 = OR	X86=	and the Company
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR	+290=	Angelon Control of the second
TOTAL	TOTAL	
ADDII. PEE (ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-	r i	ADDI-
MUMBER PRESENT DATE TIONAL		TONAL FEE
AFTER AMENDMENT PREVIOUSLY EXTRA FAIL HOUSE FEE Total * Minus ** = X\$9= OR	- X\$18=	_ ~
Independent Minus Section X43= X43= Section Section X43= Section S	X86=	
THRST PRESENTATION OF THE STREET NORTH CLAIM	+290=	engarra enacenta
+145= OR	L TOTAL	
ADDIT. FEEOR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)		
CLAIMS REMAINING AFTER AMENDMENT Total Total Total Independent Minus Mi		ADDI- TONAL FEE
Total * Minus ** = X\$ 9= OR	X\$18=	
Independent * Minus *** = X43= OR	X86=	;
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in co	ADDIT. FEE	